

### ESTIMATED INTEREST AND DIVIDENDS TAX QUARTERLY PAYMENT FORMS

#### TO MAKE YOUR ESTIMATE PAYMENT ON-LINE ACCESS E-FILE AT WWW.REVENUE.NH.GOV

#### 1 Who Must Pay Estimated Tax

Every individual, partnership, association, trust or fiduciary required to file an Interest and Dividends Tax Return must also make Estimated Interest & Dividends Tax payments for its subsequent taxable period, unless the annual estimated tax for the subsequent taxable period is less than \$500. However, quarterly payments are required to be made whenever your **annual** estimated tax for the subsequent taxable period equals or exceeds \$500. (See paragraph 6 for exceptions).

# 2 Where to Make Payments

Make estimate tax payments on-line at <a href="https://www.revenue.nh.gov">www.revenue.nh.gov</a> or mail estimate tax payments to:

NH DEPT OF REVENUE ADMINISTRATION DOCUMENT PROCESSING DIVISION PO BOX 2072 CONCORD NH 03302-2072

## 3 When to Make Payments

#### CALENDAR YEAR FILERS:

1st quarterly payment due April 15, 2005 2nd quarterly payment due June 15, 2005 3rd quarterly payment due September 15, 2005 4th quarterly payment is due January 17, 2006

#### FISCAL YEAR FILERS:

A quarterly payment is due on or before the 15th day of the 4th, 6th, 9th and 12th months of the taxable period to which they relate.

### 4 Payment of Estimated Tax

Estimated tax may be paid in full with the initial declaration or in equal installments on the due dates.

You may make all four estimate payments at one time over the Internet. Specify each date you want a payment to be made from your account and each payment will be withdrawn on the date you specified.

### **5** Underpayment Penalty

A penalty may be imposed by law (RSA 21-J:32) for an underpayment of estimated taxes if the payments are less than 90% of that period's tax liability. If estimate payments are not made on time, even if 90% of the tax is eventually paid, an underpayment penalty may be applied. If an estimated payment is missed, send the payment as soon as possible to reduce any penalty.

This penalty will not be imposed if any of the statutory exceptions apply per quarter.

## 6 Exceptions to the Underpayment Penalty

The penalty shall not apply if you meet one of the exceptions provided in the law (RSA 21-J:32). Please use form DP 2210/2220 to see if you meet one of the exceptions or to compute the amount of the penalty.

This form may be obtained from our web site at <a href="https://www.revenue.nh.gov">www.revenue.nh.gov</a> or by calling the forms line at (603)271-2192.

## 7 Need Help

QUESTIONS not covered herein may be answered in our Frequently Asked Questions(FAQ) brochure available, on the Internet at <a href="https://www.revenue.nh.gov">www.revenue.nh.gov</a> or by calling Taxpayer Assistance Office at (603) 271-2191.

Individuals who need auxiliary aids for effective communications in programs and services of the New Hampshire Department of Revenue Administration are invited to make their needs and preferences known. Individuals with hearing or speech impairments may call TDD Access: Relay NH 1-800-735-2964



#### NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION

### ESTIMATED INTEREST AND DIVIDENDS TAX QUARTERLY PAYMENT FORMS

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		2005 TAXPAYER'S WORK	KSHEET –	KEEP FOR YOUR RE	CORDS				
1 All interest an	nd divid	end income taxable by the State	)		1 _				
2 Less Exemption									
2(a) 🗌 Yourself	x \$24	00 =2(a)							
2(b) 65 (or over) or disabled Blind				Total number boxes checked			x \$12	00 =2(b)	
•	•	over) or disabled USpous [Line 2(a) plus 2(b)]	se Blind		2(c)				
								If Line 4 is less	
		able Income [Line 1 minus Line rest & Dividends Tax (Line 3 mu		7				than \$500 see instructions	
								paragraph No. 1.	
	yment	olied to next year's taxesexceeds the first 1/4 installment, and so on)			5				
6 BALANCE OF	ESTIN	MATED INTEREST & DIVIDENDS	TAX (Line	4 minus Line 5)	6				
		COM	PUTATION	N and RECORD of PA	YMENT	·s			
Date Paid		Amount of each Installment (1/4 of Line 4 of worksheet)		2004 Overpayment Applied to Installment		Balance Due		CALENDAR YEAR DUE DATES	
2		\$	\$		\$			June 15, 2005	
3		\$	\$		\$			Sept. 15, 2005	
4		\$						Jan. 17, 2006	
4		Ψ	Ψ		Ψ			Jan. 17, 2000	
			IMP	ORTANT:			·		
	PLEA	SE PUT THE NAMES AND SOCI					THE SAME	<u> </u>	
				TO BE USED ON THE					
THE P	PENALT	Y PROVISIONS OF RSA 21-J:32					E NOT BEI	EN MET.	
		(Cut along this line	and keep the e	stimated tax worksheet above fo	or your reco	rds)	$\top$		
DP-10-ES		NEW HAMPSHIRE DEPAR	_						
042	_	ESTIMATED INTERE		DIVIDENDS TAX	- 2005	•			
		005 or other taxable period be	ginning	o Day Year end	ing	o Day Year			
PLEASE PRINT OR TYP		ONE:	(3) Partn	ership 4 F	iduciary	,	FOR	DRA USE ONLY	
Payment	LAST N	ONE: 1 Individual/Joint 2 AME OF INDIVIDUAL OR PROPRIETOR	SOCIAL SECU	RITY NUMBER	<u> </u>				
Form 1 Calendar Year	SPOUS	E'S LAST NAME		FIRST NAME & INITIAL	SPOUSE'S SO	OCIAL SECURI	TY NUMBER		
FOR DRA USE ONLY	NAME OF PARTNERSHIP OR FIDUCIARY					FEDERAL EMPLOYER IDENTIFICATION NUMBER OR			
	NUMBE							ON NUMBER (SMLLC)	
	ADDRE	SS (Continued)							
	CITY/TOWN, STATE & ZIP CODE					Amount of This Payment	\$		
	<u> </u>			Make check payable	to: STATE C	OF NEW HAMPSHIRE			
	B 4 A	CHECK IF ADDRESS IS DIFFERENT FROM PRIOR RETURN.  NH DEPT OF REVENUE ADMINISTRATION					Enclose, but do not staple or tape, you payment with this estimate. Do not file a \$6 estimate.		
	MAI	L DOCUMENT PROCESSING DIVI PO BOX 2072 CONCORD NH 03302-2072	83		ootimate.	DP-10-ES Rev. 7/14/04			

DP-10-ES	NEW HAMPSHIRE DEPARTMENT OF	REVENUE ADMINISTRATIO	N								
042	ESTIMATED INTEREST AND	DIVIDENDS TAX - 200	)5								
	EAR <b>2005</b> or other taxable period beginning	ending									
PLEASE PRINT OR TYP		lo Day Year	Mo Day	Year	500 DDA 1105 ONLY						
	CHECK ONE: 1 Individual/Joint 3 Partr	nership 4 Fiduciary		l	FOR DRA USE ONLY						
Payment	LAST NAME OF INDIVIDUAL OR PROPRIETOR	FIRST NAME & INITIAL	S	OCIAL SECURIT	Y NUMBER						
Form 2 Calendar Year	SPOUSE'S LAST NAME	FIRST NAME & INITIAL	SPOUSE'S SOCIAL SECURITY NUMBER								
FOR DRA USE ONLY	NAME OF PARTNERSHIP OR FIDUCIARY	FI	FEDERAL EMPLOYER IDENTIFICATION NUMBER OR DEPARTMENT IDENTIFICATION NUMBER (SMLLC)								
	NUMBER & STREET ADDRESS	EPARTMENT IDI	ENTIFICATION NUMBER (SMLLC)								
	ADDRESS (Continued)		mount of This								
	CITY/TOWN, STATE & ZIP CODE	Payme									
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	MAIL NH DEPT OF REVENUE ADMINISTRATION TO: DOCUMENT PROCESSING DIVISION	payme									
	TO: PO BOX 2072 CONCORD NH 03302-2072			DP-10-ES Rev. 7/14/04							
	CONCORD NH 03302-2072	(Cut along this line and keep the	estimated ta	x worksheet above	for your records)						
DP-10-ES	NEW HAMPSHIRE DEPARTMENT OF	REVENUE ADMINISTRATIO	N								
042	ESTIMATED INTEREST AND	DIVIDENDS TAX - 200	<b>)</b> 5								
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PLEASE PRINT OR TYP		lo Day Year	Mo Day	Year	FOR DRA USE ONLY						
		nership 4 Fiduciar	у	Į.	TON DICA OOL ONLY						
Payment Form 3	LAST NAME OF INDIVIDUAL OR PROPRIETOR	FIRST NAME & INITIAL	SOCIAL SECURITY NUMBER								
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	CITY/TOWN, STATE & ZIP CODE		Payment \$								
	CHECK IF ADDRESS IS DIFFERENT FROM	Enclos	Make check payable to: STATE OF NEW HAMPSHIRI Enclose, but do not staple or tape, you payment with this estimate. Do not file a \$ estimate.								
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	MAIL NH DEPT OF REVENUE ADMINISTRATION DOCUMENT PROCESSING DIVISION PO BOX 2072 CONCORD NH 03302-2072			DP-10-ES Rev. 7/14/04							
	(Cut along this line and keep the e	estimated tax worksheet above for your re	ecords)								
FORM	NEW HAMPSHIRE DEPARTMENT OF	REVENUE ADMINISTRATIO	N								
DP-10-ES	ESTIMATED INTEREST AND	DIVIDENDS TAX - 200	<b>)</b> 5								
042 For CALENDAR Y	EAR <b>2005</b> or other taxable period beginning	ending									
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		nership 4 Fiduciary		l	FOR DRA USE ONLY						
Payment	LAST NAME OF INDIVIDUAL OR PROPRIETOR	SOCIAL SECURITY NUMBER									
Form 4 Calendar Year Due Jan. 17, 2006	SPOUSE'S LAST NAME	SI	SPOUSE'S SOCIAL SECURITY NUMBER								
FOR DRA USE ONLY	NAME OF PARTNERSHIP OR FIDUCIARY	FI	FEDERAL EMPLOYER IDENTIFICATION NUMBER OR DEPARTMENT IDENTIFICATION NUMBER (SMLLC)								
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	CHECK IF ADDRESS IS DIFFERENT FROM	Make check payable to: STATE OF NEW HAMPSHIRI Enclose, but do not staple or tape, you									

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MAIL DOCUMENT PROCESSING DIVISION
TO: PO BOX 2072
CONCORD NH 03302-2072

Enclose, but do not staple or tape, your payment with this estimate. Do not file a \$0 estimate.

DP-10-ES
Rev. 7/14/04